

## Electronic Patent Application Fee Transmittal

| <b>Application Number:</b>                              | 10531579  |          |        |                      |
|---|---|----------|--------|----------------------|
| <b>Filing Date:</b>                                     | 12-Oct-2005   |          |        |                      |
| <b>Title of Invention:</b>                              | Painless injectable compositons containing salts of 2-arylpropionic acids |          |        |                      |
| First Named Inventor/Applicant Name:                    | Marco Maria Gentile   |          |        |                      |
| <b>Filer:</b>   | Mark Sandler Weiner/sandra hitchner                                       |          |        |                      |
| <b>Attorney Docket Number:</b>                          | 3765-0114PUS1   |          |        |                      |
| Filed as Large Entity                                   |   |          |        |                      |
| <b>U.S. National Stage under 35 USC 371 Filing Fees</b> |   |          |        |                      |
| Description   | Fee Code  | Quantity | Amount | Sub-Total in USD(\$) |
| <b>Basic Filing:</b>                                    |   |          |        |                      |
| <b>Pages:</b>   |   |          |        |                      |
| <b>Claims:</b>  |   |          |        |                      |
| <b>Miscellaneous-Filing:</b>                            |   |          |        |                      |
| <b>Petition:</b>  |   |          |        |                      |
| <b>Patent-Appeals-and-Interference:</b>                 |   |          |        |                      |
| Post-Allowance-and-Post-Issuance:                       |   |          |        |                      |
| <b>Extension-of-Time:</b>                               |   |          |        |                      |
| Extension - 3 months with \$0 paid                      | 1253  | 1        | 1020   | 1020                 |

| Description                       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-----------------------------------|----------|----------|--------|----------------------|
| Miscellaneous:                    |          |          |        |                      |
| Request for continued examination | 1801     | 1        | 790    | 790                  |
| Total in USD (\$)                 |          |          |        | 1810                 |